

National Organization for Women PAC

1100 H Street, NW

3rd Fl

Washington

DC

20005

FEC ID No. C00092247

☒ 24-Hour Notice ☐ 48-Hour Notice

## SCHEDULE E (FEC Form 3X)

## ITEMIZED INDEPENDENT EXPENDITURES

PAGE OF 1 / 8

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)  
National Organization for Women PAC

FEC IDENTIFICATION NUMBER

C C00092247

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Johanna Ettin

Date

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Amount

66.66

City

Washington

State

DC

Zip Code

20005

Purpose of Expenditure  
field organizingCategory/  
Type

001

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: 00

☒ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☒ Primary☐ General 2008☐ Other (specify) : \_\_\_\_\_

Transaction ID: SE.30738

Calendar Year-To-Date Per Election

4231.13

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Johanna Ettin

Date

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Amount

140.00

City

Washington

State

DC

Zip Code

20005

Purpose of Expenditure  
food, lodging, travelCategory/  
Type

002

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: 00

☒ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☒ Primary☐ General 2008☐ Other (specify) : \_\_\_\_\_

Transaction ID: SE.30740

Calendar Year-To-Date Per Election

4347.80

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures .....

206.66

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Latifa Lyles

Signature

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 8

## 24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

## SCHEDULE E (FEC Form 3X)

## ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)  
National Organization for Women PAC

FEC IDENTIFICATION NUMBER

C C00092247

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Johanna Ettin

Date

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Amount

66.66

City State Zip Code  
Washington DC 20005Purpose of Expenditure  
field organizingCategory/  
Type 001Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: 00  
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTONDisbursement For: ☒ Primary ☐ General 2008☐ Other (specify) : \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought 4646.26

Transaction ID: SE.30737

Full Name (Last, First, Middle, Initial) of Payee

Johanna Ettin

Date

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Amount

140.00

City State Zip Code  
Washington DC 20005Purpose of Expenditure  
food, lodging, travelCategory/  
Type 002Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: 00  
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTONDisbursement For: ☒ Primary ☐ General 2008☐ Other (specify) : \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought 4762.93

Transaction ID: SE.30741

(a) SUBTOTAL of Itemized Independent Expenditures .....

206.66

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Latifa Lyles

Signature

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 8

## 24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

## SCHEDULE E (FEC Form 3X)

## ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)  
National Organization for Women PAC

FEC IDENTIFICATION NUMBER

C C00092247

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Ms. Marcia Pappas

Date

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Amount

172.56

Mailing Address  
3 Equality CourtCity State Zip Code  
Albany NY 12205Purpose of Expenditure  
food, lodging, travelCategory/  
Type 002Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: 00  
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTONDisbursement For: ☒ Primary ☐ General 2008☐ Other (specify) : \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought 4497.03

Transaction ID: SE.30742

Full Name (Last, First, Middle, Initial) of Payee

Ms. Marcia Pappas

Date

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Amount

172.56

Mailing Address  
3 Equality CourtCity State Zip Code  
Albany NY 12205Purpose of Expenditure  
food, lodging, travelCategory/  
Type 002Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: 00  
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTONDisbursement For: ☒ Primary ☐ General 2008☐ Other (specify) : \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought 4762.93

Transaction ID: SE.30745

(a) SUBTOTAL of Itemized Independent Expenditures .....

345.12

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....

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Latifa Lyles

Signature

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 8

## 24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

## SCHEDULE E (FEC Form 3X)

## ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)  
National Organization for Women PAC

FEC IDENTIFICATION NUMBER

C C00092247

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Pat Reuss

Date

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Amount

23.33

Mailing Address  
5640 Kirkham Ct.City State Zip Code  
Springfield VA 22151Purpose of Expenditure  
food, lodging, travelCategory/  
Type 002Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: 00  
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTONDisbursement For: ☒ Primary ☐ General 2008☐ Other (specify) : \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought 4187.80

Transaction ID: SE.30733

Full Name (Last, First, Middle, Initial) of Payee

Pat Reuss

Date

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Amount

66.66

Mailing Address  
5640 Kirkham Ct.City State Zip Code  
Springfield VA 22151Purpose of Expenditure  
field organizingCategory/  
Type 001Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: 00  
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTONDisbursement For: ☒ Primary ☐ General 2008☐ Other (specify) : \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought 4231.13

Transaction ID: SE.30734

(a) SUBTOTAL of Itemized Independent Expenditures .....

89.99

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....

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Latifa Lyles

Signature

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 8

## 24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour Notice

## SCHEDULE E (FEC Form 3X)

## ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)  
National Organization for Women PAC

FEC IDENTIFICATION NUMBER

C C00092247

Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Pat Reuss

Date

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Amount

23.33

Mailing Address  
5640 Kirkham Ct.City State Zip Code  
Springfield VA 22151Purpose of Expenditure  
food, lodging, travelCategory/  
Type 002Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: 00  
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTONDisbursement For: ☒ Primary ☐ General 2008☐ Other (specify) : \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought 4646.26

Transaction ID: SE.30735

Full Name (Last, First, Middle, Initial) of Payee

Pat Reuss

Date

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Amount

66.66

Mailing Address  
5640 Kirkham Ct.City State Zip Code  
Springfield VA 22151Purpose of Expenditure  
field organizingCategory/  
Type 001Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: 00  
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTONDisbursement For: ☒ Primary ☐ General 2008☐ Other (specify) : \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought 4646.26

Transaction ID: SE.30736

(a) SUBTOTAL of Itemized Independent Expenditures .....

89.99

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....

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Latifa Lyles

Signature

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 8

## 24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :

FEC ID No.

☐ 24-Hour Notice ☐ 48-Hour NoticeSCHEDULE E (FEC Form 3X)  
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NAME OF COMMITTEE (In Full) National Organization for Women PAC	FEC IDENTIFICATION NUMBER <b>C</b> C00092247
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Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Ms. Olga Vives

Date

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Amount

172.56

Mailing Address  
4220 Campbell Avenue, #620City State Zip Code  
Arlington VA 22206-3426Purpose of Expenditure  
food, lodging, travelCategory/  
Type 002Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: 00  
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTONDisbursement For: ☒ Primary ☐ General 2008☐ Other (specify) : \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought 4646.26

Transaction ID: SE.30747

Full Name (Last, First, Middle, Initial) of Payee

Ms. Olga Vives

Date

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Amount

172.56

Mailing Address  
4220 Campbell Avenue, #620City State Zip Code  
Arlington VA 22206-3426Purpose of Expenditure  
food, lodging, travelCategory/  
Type 002Office Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: 00  
☒ PresidentialCheck One: ☒ Support ☐ OpposeName of Federal Candidate supported or Opposed by expenditure:  
HILLARY RODHAM CLINTONDisbursement For: ☒ Primary ☐ General 2008☐ Other (specify) : \_\_\_\_\_Calendar Year-To-Date Per Election  
for Office Sought 4762.93

Transaction ID: SE.30748

(a) SUBTOTAL of Itemized Independent Expenditures .....

345.12

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Latifa Lyles

Signature

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 8

**24 / 48 HOUR NOTICE OF INDEPENDENT / COORDINATED EXPENDITURE, on :****FEC ID No.**☐ 24-Hour Notice ☐ 48-Hour Notice**SCHEDULE E (FEC Form 3X)****ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)  
National Organization for Women PAC**FEC IDENTIFICATION NUMBER****C** C00092247Check if ☒ 24-hour notice ☐ 48-hour notice

Full Name (Last, First, Middle, Initial) of Payee

Dr. Marion Wagner

Date

M M / D D / Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Amount

23.33

City

Indianapolis

State

IN

Zip Code

46228-2911

Purpose of Expenditure  
food, lodging, travelCategory/  
Type

002

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: 00

☒ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☒ Primary☐ General 2008☐ Other (specify) : \_\_\_\_\_**Transaction ID:** SE.30730

Calendar Year-To-Date Per Election

4187.80

for Office Sought

Full Name (Last, First, Middle, Initial) of Payee

Dr. Marion Wagner

Date

M M / D D / Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Amount

23.33

City

Indianapolis

State

IN

Zip Code

46228-2911

Purpose of Expenditure  
food, lodging, travelCategory/  
Type

002

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: 00

☒ Presidential

Check One:

☒ Support☐ Oppose

Disbursement For:

☒ Primary☐ General 2008☐ Other (specify) : \_\_\_\_\_**Transaction ID:** SE.30732

Calendar Year-To-Date Per Election

4646.26

for Office Sought

(a) SUBTOTAL of Itemized Independent Expenditures .....

46.66

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....

1330.20

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Latifa Lyles

Signature

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 0 8

Image# 28931225480

Form/Schedule: **F24** House Parties for Hillary Clinton for PA Primary on 4/22/08

Transaction ID:

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